

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

Weekly Bulletin



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GUY P. JONES
EDITOR

White House Conference Recommendations

The White House Conference on Child Health, called by President Hoover, has issued a set of recommendations which were released to the press, last week, as follows:

1. Every prospective mother should have suitable information, medical supervision during parental period, competent care at confinement. Every mother should have post-natal medical supervision for herself and child.

2. Every child should receive personal health examinations before and during the school period, including adolescence, by the family physician, or the school or other public physician, and such examination by specialists and such hospital care as its special needs may require.

3. Every child should have regular dental examination and care.

4. Every child should have instruction in the schools in health and in safety from accidents. And every teacher should be trained in health programs.

5. Every child should be protected from communicable diseases to which he might be exposed at home, in school or at play, and protected from impure milk and food.

6. Every child should have proper sleeping rooms, diet, hours of sleep and play, and parents should receive expert information as to the needs of children of various ages as to these questions.

7. Every child should attend a school which has proper seating, lighting, ventilation and sanitation.

For younger children kindergartens and nursery schools should be provided to supplement home care.

8. The schools should be so organized as to discover and develop the special abilities of each child, and should assist in vocational guidance, for children, like men, succeed by the use of their strongest qualities and special interests.

9. Every child should have some form of religious, moral and character training.

10. Every child has a right to a place to play with adequate facilities therefor.

11. With the expanding domain of the community's responsibilities for children, there should be proper provision for and supervision of recreation and entertainment.

12. Every child should be protected against labor that stunts growth, either physical or mental; that limits education, that deprives children of the right of comradeship, or joy and play.

13. Every child who is blind, deaf, crippled or otherwise physically handicapped should be given expert study and corrective treatment where there is the possibility of relief, and appropriate development or training. Children with subnormal or abnormal mental conditions should receive adequate study, protection, training and care.

14. Every waif and orphan in need must be supported.

15. Every child is entitled to the feeling that he has a home. The extension of the services in the community should supplement and not supplant parents.

16. Children who habitually fail to meet normal standards on human behavior should be provided special care under the guidance of the school, the community health or welfare center, or other agency for continued supervision, if necessary, control.

17. Where the child does not have these services, due to inadequate income of the family, then such services must be provided to him by the community.

18. The rural child should have as satisfactory schooling, health protection and welfare facilities as the city child.

19. In order that these minimum protections of the health and welfare of children may be everywhere available, there should be a district, county or community organization for health education with full-time officials, coordinating with a state-wide program which will be responsive to a nation-wide service of general information, statistics and scientific research. This should include:

- (a) Trained full-time public officials, with public health nurses, sanitary inspection and laboratory workers.
- (b) Available hospital beds.
- (c) Full-time public welfare services for the relief and aid of children in special need from poverty or misfortune or the protection of children from abuse, neglect, exploitation or moral hazard.
- (d) The development of voluntary organization of children for purposes of instruction, health and recreation through private effort and benefaction. When possible, existing agencies should be coordinated.

BIRTHS AMONG CALIFORNIA INDIANS

Relatively few births are reported among the Indians of California. During the past two years, however, there has been a considerable increase in the numbers of births reported. The following table shows the numbers of such births registered during the past ten years.

Indian Births in California, 1920-1929

	Total births	Indian births	Per cent of total
1920	67,198	123	.2
1921	72,438	188	.3
1922	73,321	174	.2
1923	80,237	220	.3
1924	86,899	188	.2
1925	85,492	171	.2
1926	82,372	221	.3
1927	84,334	236	.3
1928	83,643	315	.4
1929	81,498	314	.4

How much so ever you may study science, when you do not act wisely you are ignorant.—*The Galistan.*

ARE YOU TRAINING YOUR CHILD TO BE HAPPY?

The above is the title of a booklet issued by the Children's Bureau of the United States Department of Labor at Washington, which may be obtained from that bureau by sending the purchase price of 10 cents. The material in this booklet constitutes a series of lessons in child management, prepared in attractive but practical form. Emphasis is placed upon truthfulness, healthfulness and happiness, with stress placed upon the strong interrelation between these three attributes. In order to present an idea of the nature of this publication, the introduction is printed here:

"ARE YOU TRAINING YOUR CHILD TO BE HAPPY?"

Do you have a happy baby?

Does he laugh and coo while you work?

Does he play quietly by himself while you work?

Does your little child like the food you give him?

Is he ready and willing to go to bed at bedtime?

Does he love the new baby?

Does he play happily with other children?

Then he is happy and good.

Does your baby cry all day?

Does he get mad and kick and scream?

Does your little child spit out the food he does not like?

Does he beg you not to put him to bed?

Does he tease the new baby?

Of course you do not want these things.

We can help you to make your baby happy, but you must help, too.

You must try very hard.

You must never stop trying.

You are tired and busy some day. Your baby is crying. You say, "This one time does not matter. I will pick him up. Then he will stop crying."

Then your smart little baby says to himself, "Hurrah, I was boss that time! I can be boss next time."

Before you know it he will cry again. Will you pick him up again?

Do you always give him what he wants?

Then he will not be happy long.

If you send ten cents to the United States Children's Bureau, Department of Labor, Washington, D. C., with you name and address, and with request for copy of this booklet you will receive it by mail.

A strange rage this modern mania to give a common manner to all minds and to destroy individuality.—*Maurice Barrès.*

MORTALITY AMONG CALIFORNIA INDIANS

During the past five years, 1925-1929, there have been 1519 deaths among the Indians of California. Of these, 353 were due to tuberculosis and 170 were caused by other epidemic diseases. This means that 34.4 per cent of all Indian deaths in California during the past five years were due to preventable diseases. This is nearly three times as high as the proportion of deaths from preventable causes in the general population of the state. Pneumonia, too, causes three times as many deaths, proportionately, among Indians of California as compared with the general population of the state.

On the other hand, heart disease and cancer cause three times more deaths among the general population than among the Indians of California. It would seem that the Indian is more likely to die of one of the communicable diseases than is the white man. The latter has provided himself with protective measures against the invasion of communicable diseases. The Indian, however, is not equipped with such safeguards as civilization provides and he falls a ready victim to the attacks of this subtle enemy. To be sure, the question of racial immunity and relative factors enter into the problem, but, in spite of these factors, it is certain that many Indian lives might be saved if adequate public health machinery were provided for the purpose.

The following table analyzes deaths among California Indians, by causes, during the past five years:

Mortality in California Indians by Cause, 1925-1929

Cause of death	Numbers of deaths, five-year period	Percentage of total
Tuberculosis	353	23.2
Other epidemic diseases	170	11.2
Pneumonia	173	11.4
Circulatory system	148	9.7
External causes	119	7.8
Early infancy	57	3.8
Diarrhea and enteritis, under 2 years	50	3.3
Digestive system	88	5.8
Cancer	47	3.1
Senility	37	2.4
All other causes	277	18.3
Total	1,519	100.0

NEW HEALTH OFFICER AT LAKEPORT

Mr. A. N. Wilcox has been appointed City Health Officer of Lakeport to succeed Mr. R. S. Russell.

I can not help believing that medical curative treatment will by and by resolve itself in a great measure into modifications of food swallowed. The effects of milk and vegetable diet, of cod liver oil—are only hints of what will be accomplished when we have learned to discover what organic elements are deficient or in excess in a case of chronic disease and the best way of correcting the abnormal condition. *Oliver Wendell Holmes, 1861. Medical Essays.*

LIST OF DISEASES REPORTABLE BY LAW

ANTHRAX	MUMPS
BERI-BERI	OPHTHALMIA NEONATORUM
BOTULISM	PARATYPHOID FEVER
CEREBROSPINAL MENINGITIS (Epidemic)	PELLAGRA
CHICKENPOX	PLAGUE
CHOLERA, ASIATIC	PNEUMONIA (Lobar)
COCCIDIOIDAL GRANULOMA	POLIOMYELITIS
DENGUE	RABIES (Animal)
DIPHTHERIA	RABIES (Human)
DYSENTERY (Amoebic)	ROCKY MOUNTAIN SPOTTED (or Tick) FEVER
DYSENTERY (Bacillary)	SCARLET FEVER
ENCEPHALITIS (Epidemic)	SMALLPOX
ERYSIPELAS	SYPHILIS*
FLUKES	TETANUS
FOOD POISONING	TRACHOMA
GERMAN MEASLES	TUBERCULOSIS
GLANDERS	TULAREMIA
GONOCOCCUS INFECTION*	TYPHOID FEVER
HOOKWORM	TYPHUS FEVER
INFLUENZA	UNDULANT (Malta) FEVER
JAUNDICE (Infectious)	WHOOPING COUGH
LEPROSY	YELLOW FEVER
MALARIA	
MEASLES	

*Reported by office number. Name and address not required.

QUARANTINABLE DISEASES

CEREBROSPINAL MENINGITIS (Epidemic)	POLIOMYELITIS
CHOLERA, ASIATIC	SCARLET FEVER
DIPHTHERIA	SMALLPOX
ENCEPHALITIS (Epidemic)	TYPHOID FEVER
LEPROSY	TYPHUS FEVER
PLAGUE	YELLOW FEVER

Man stumbles over molehills, never over mountains.—*Chinese Proverb.*

DR. L. W. HACKETT IN CALIFORNIA

Dr. L. W. Hackett, Assistant Director of the International Health Board, who is stationed at Rome, Italy, on November 25th addressed a special meeting of the Entomology and Parasitology Seminar of the University of California College of Agriculture at Berkeley. Dr. Hackett's subject was "Malaria Control Through Anti-Mosquito Measures in Italy." This special meeting, which was open to the general public, was called by Professor W. B. Herms of the Division of Entomology and Parasitology of the University of California.

DR. W. LELAND MITCHELL DIES

Many Californians who knew Dr. W. Leland Mitchell, formerly Health Officer of Orange County, will be shocked to learn of his death, which occurred recently in Budapest, Hungary. Dr. Mitchell, since leaving California in 1925, had been with the International Health Board and had been stationed in Paris and in Budapest. Only last year, he had taken a year of special study at the Johns Hopkins University School of Public Health.

MORBIDITY ***Diphtheria.**

66 cases of diphtheria have been reported, as follows: Berkeley 2, Oakland 3, Fresno County 1, Fresno 1, Glenn County 2, Los Angeles County 5, Los Angeles 27, Santa Monica 1, Torrance 1, Orange County 8, Orange 1, Santa Ana 1, Riverside 1, Sacramento 1, San Francisco 4, San Joaquin County 1, Redwood City 1, Santa Clara County 2, Palo Alto 1, San Jose 1, Exeter 1.

Scarlet Fever.

96 cases of scarlet fever have been reported, as follows: Alameda County 1, Berkeley 2, Oakland 4, Contra Costa County 2, Pittsburg 1, Fresno County 4, Fresno 3, Humboldt County 1, Bakersfield 1, Los Angeles County 6, Beverly Hills 1, Glendora 1, Huntington Park 1, Long Beach 3, Los Angeles 7, Hawthorne 3, Bell 4, Merced County 1, Monterey County 1, Nevada County 1, Orange County 2, Laguna Beach 1, Riverside County 5, Riverside 2, Sacramento 4, San Diego 1, San Francisco 9, San Joaquin County 9, San Luis Obispo 1, Burlingame 1, Santa Maria 1, San Jose 4, Sunnyvale 1, Tulare County 1, Dinuba 3, Exeter 1, Yolo County 2.

Measles.

188 cases of measles have been reported, as follows: Alameda County 4, Hayward 2, Fresno County 1, Los Angeles County 3, Azusa 36, Glendora 2, Huntington Park 1, Los Angeles 3, Manhattan 1, Pomona 1, Redondo 6, South Gate 1, Bell 1, Gardena 1, Napa County 1, Grass Valley 1, Riverside County 46, Riverside 1, Ontario 14, San Diego 2, San Francisco 1, San Luis Obispo County 9, Arroyo Grande 1, San Luis Obispo 15, Santa Barbara County 6, San Jose 1, Tulare County 4, Exeter 5, Tulare 1, Visalia 14, Ventura County 3.

Smallpox.

18 cases of smallpox have been reported, as follows: Oak-

* From reports received December 1st and 2d for week ending November 29th.

land 1, Placerville 1, Fresno County 1, Kern County 2, Napa 4, Daly City 4, Santa Cruz 1, Vallejo 1, Sutter County 2, Yuba City 1.

Typhoid Fever.

8 cases of typhoid fever have been reported, as follows: Oakland 1, Hanford 1, Los Angeles County 1, Los Angeles 1, Sacramento 1, Ceres 1, Tulare County 2.

Whooping Cough.

100 cases of whooping cough have been reported, as follows: Alameda 8, Berkeley 3, Oakland 6, Contra Costa County 7, Los Angeles County 12, Hermosa 4, Inglewood 1, Los Angeles 17, Monrovia 1, Pasadena 1, Santa Ana 2, Laguna Beach 1, Sacramento 7, San Diego 2, San Francisco 23, Stockton 1, San Luis Obispo 1, Santa Clara 2, Santa Cruz County 1.

Poliomyelitis.

27 cases of poliomyelitis have been reported, as follows: Berkeley 1, Oakland 1, Crescent City 1, Fresno 1, Los Angeles County 1, Alhambra 1, Glendale 1, Long Beach 1, Los Angeles 2, Hawthorne 1, Madera 1, San Francisco 3, Stockton 1, San Luis Obispo County 1, San Luis Obispo 2, Burlingame 3, San Carlos 1, Stanislaus County 2, Patterson 1, Sutter County 1.

Meningitis (Epidemic).

4 cases of epidemic meningitis have been reported, as follows: Amador County 1, Shasta County 3.

Leprosy.

Los Angeles County reported one case of leprosy.

Undulant Fever.

Santa Ana reported one case of undulant fever.

NOTE.—Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

COMMUNICABLE DISEASE REPORTS

Disease	1930				1929			
	Week ending			Reports for week ending Nov. 29 received by Dec. 2	Week ending			Reports for week ending Nov. 30 received by Dec. 3
	Nov. 8	Nov. 15	Nov. 22		Nov. 9	Nov. 16	Nov. 23	
Anthrax	0	1	0	0	0	0	0	0
Chickenpox	189	188	285	228	239	208	311	269
Coccidioides Granuloma	1	0	0	0	0	1	4	2
Diphtheria	87	83	69	66	84	76	108	73
Dysentery (Amoebic)	1	0	0	1	3	1	1	1
Dysentery (Bacillary)	2	1	3	6	1	6	3	2
Encephalitis (Epidemic)	0	1	2	0	1	0	1	1
Erysipelas	11	12	12	13	10	9	20	14
Food Poisoning	0	0	0	0	0	0	6	0
German Measles	11	6	10	9	9	5	11	7
Gonococcus Infection	157	135	160	152	130	101	129	112
Influenza	29	27	31	43	55	40	40	65
Jaundice (Epidemic)	0	0	0	0	0	0	0	1
Leprosy	0	0	0	1	0	0	4	0
Malaria	0	1	1	0	1	2	3	0
Measles	114	103	117	188	65	73	136	132
Meningitis (Epidemic)	4	5	5	4	2	7	8	7
Mumps	143	151	186	121	288	256	363	281
Ophthalmia Neonatorum	2	0	0	0	0	0	0	0
Paratyphoid Fever	1	1	1	0	0	0	0	0
Pellagra	1	2	0	3	2	0	0	0
Pneumonia (Lobar)	48	58	56	63	46	49	57	87
Poliomyelitis	48	45	27	27	3	3	3	2
Rabies (Animal)	15	12	13	24	13	14	19	13
Scarlet Fever	108	100	98	96	196	243	290	281
Smallpox	13	24	18	18	49	35	54	27
Syphilis	179	153	156	209	184	169	132	116
Tetanus	1	3	3	1	0	1	1	1
Trachoma	4	107	7	4	3	3	2	3
Trichinosis	1	0	1	0	0	0	0	0
Tuberculosis	212	177	184	133	191	215	155	143
Tularemia	0	0	0	0	0	3	1	0
Typhoid Fever	18	15	12	8	17	13	11	5
Undulant Fever	3	5	4	1	3	4	2	0
Whooping Cough	120	103	97	100	125	91	125	78
Totals	1,523	1,513	1,558	1,519	1,720	1,628	2,000	1,723

Epidemic poliomyelitis remains at a lower level.

Chickenpox, measles, mumps, scarlet fever and whooping cough are the most prevalent of the communicable diseases.

Influenza shows a slight increase.

Diphtheria is at a low stage for this season of the year.